



LINDA M. HODGDON  
Commissioner

THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF ADMINISTRATIVE SERVICES

BUREAU OF PUBLIC WORKS DESIGN & CONSTRUCTION

PROJECT WORK REQUEST/AUTHORIZATION FORM

Date:

Agency:

To: Mary Kibbee-Lee, Business Administrator III  
Email: [mkibbee-lee@dot.state.nh.us](mailto:mkibbee-lee@dot.state.nh.us)

From:

Project Name:

Project Contact:

(Person with authority for funding and decisions)

Project Address:

Tel. No:

Town/City:

Email:

**Project Description:** Include needs, major issues (such as hazardous materials), other special requirements (such as night/weekend work, grant conditions, prevailing wages, etc.). Use 2<sup>nd</sup> word document sheet if needed.

Project Schedule: Est. Start Date:

Est. Completion Date:

**Services Requested:** (BPW charges apply to all non-general fund projects per RSA 21-I:85).

(The BPW will determine if a consultant is required. A consultant scope and fee will be reviewed with the Project Contact).

Design: Bidding: Construction Administration: Other:

**Funding for Project: (Amount, Appropriation and Type of Funds)**

Acctg. Unit	Agency	Co.	Object	Amount	Gen. %	Fed. %	Hwy. %	Other %	Lapse Date
				\$					
				\$					
				\$					
				\$					
				\$					

\*\*\*\*If multiple funding sources, indicate order of use\*\*\*\*

Submission of this form certifies that the funding amount and source stated can be encumbered by the Bureau of Public Works and these funds are dedicated to this project.

FOR BPW USE ONLY

Approved:

Assigned To:

Date:

John O. Morton Building • 7 Hazen Drive, Room 250 • POB 483 • Concord, New Hampshire 03302-0483  
Telephone: 603-271-3516 • Fax: 603-271-3515 • TDD: 1-800-735-2964

<http://das.nh.gov/publicworks>

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